PTO/SB/06 (08-03)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 896 Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) RATE FEE NUMBER EXTRA FEE NUMBER FILED FOR 770.W BASIC FFF OR (37 CFR 1.16(a)) TOTAL CLAIMS X S minus 20 = X S OR (37 CFR 1.18(c)) INDEPENDENT CLAIMS OR X \$ minus 3 = (37 CFR 1.16(b)) OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) 7 70.UD TOTAL TOTAL OR \* If the difference in column 1 is less than zero, enter "0" in column 2. CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY (Column 1) HIGHEST CLAIMS PRESENT RATE ADDI-RATE ADDI-REMAINING NUMBER AMENDMENT PREVIOUSLY TIONAL TIONAL **EXTRA AFTER** PAID FOR FEE FBE) AMENDMENT Total (37 CFR 1.16(c)) Minus OR Minus .7 3 X \$ = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST PRESENT RATE ADDI-RATE ADDI-REMAINING NUMBER IENT! **EXTRA** TIONAL TIONAL PREVIOUSLY AFTER FEE FEE AMENDMENT PAID FOR Total (37 CFR 1.16(c)) Minus ENDMI OR X \$ Minus = = X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST PRESENT RATE RATE ADDI-ADDI-REMAINING NUMBER TIONAL PREVIOUSLY **EXTRA** TIONAL **AFTER** ENDMENT FEE FEE PAID FOR AMENDMENT Total (37 CFR 1.16(c)) Minus OR Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## PATENT APPLICATION FEE DETERMINATION RECORD 5038-150 Effective October 1, 2001 **CLAIMS AS FILED - PART I** SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY (Column 1) (Column 2) **TOTAL CLAIMS** RATE RATE FEE FEE BASIC FEE **BASIC FEE** 370.00 740.00 FOR NUMBER EXTRA NUMBER FILED OR TOTAL CHARGEABLE CLAIMS 198 minus 20= X\$18= X\$ 9= OR INDEPENDENT CLAIMS minus 3 = X42 =X84 =OR MULTIPLE DEPENDENT CLAIM PRESENT +280= +140= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 938 TOTAL TOTAL OR CLAIMS AS AMENDED - PART II SEE LE **OTHER THAN** OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) (Column 3) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL RATE TIONAL **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE **FEE AMENDMENT** PAID FOR X\$18= Total Minus X\$ 9= ÓR Independent Minus \*\*\* X42 =X84 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR TOTAL **TOTAL** OR ADDIT. FEE ADDIT, FEE (Column 3) (Column 2) (Column 1) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL RATE TIONAL RATE PREMOUSLY AMENDMENT **AFTER EXTRA** PAID FOR FEE FEE AMENDMENT Total Minus X\$18= X\$ 9= OR Independent Minus X42 =X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OR TOTAL TOTAL OR ADDIT. FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL TIONAL RATE RATE AFTER AMENDMENT **AMENDMENT PREVIOUSLY EXTRA** PAID FOR KEE FEE Total Minus X\$18= X\$ 9= OR Independent Minus \*\*\* X84= X42= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= OR

TOTAL

ADDIT, FEE

24.00

TOTAL

ADDIT, FEE

Application or Docket Number

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1